SUBCHAPTER NUMBER AND TITLE

TABLE OF CONTENTS

PAGE

iv

DAY HABILITATION PROGRAM MANUAL

DHP-20

TRANSMITTAL LETTER

DATE

2-20 11/01/99

4. PROGRAM REGULATIONS

	419.401:	Introduction	4-1
	419.402:	Definitions	4-1
	419.403:	Eligible Members	4-3
	419.404:	Provider Eligibility	4-3
	419.405:	Administration	4-3
	419.406:	Reporting Requirements	4-4
	419.407:	Payment for Services	4-4
	419.408:	Scope of Services	4-5
	419.409:	Conditions of Payment	4-5
	419.410:	Nonreimbursable Services	4-6
	419.411:	Nonreimbursable Circumstances	4-6
(130 CMR 419.412 through 419.420 Reserved)			
	419.421:	Referrals and Written Agreements	4-7
	419.422:	Staffing: General	4-7
	419.423:	Staffing: Professional Interdisciplinary Team	4-7
	419.424:	Staffing: Administrator	4-8
	419.425:	Staffing: Program Director	4-8
	419.426:	Staffing: Health-Care Supervisor	4-8
	419.427:	Staffing: Minimum Professional Qualifications	4-9
(130 CMR 419.428 through 419.430 Reserved)			
	419.431:	Emergency Services and Plans	4-11
	419.432:	Administration of Medications	4-11
	419.433:	Food Storage and Preparation	4-12
	419.434:	Written Policies and Procedures	4-12
	419.435:	Admission Criteria	4-13
	419.426:	Admission Procedures	4-14
(130 CMR 419.437 through 419.442 Reserved)			
	419.443:	Recipient Severity Profile	4-15
	419.444:	Individual Service Plan	4-15
	419.445:	Case Manager	4-15
	419.446:	Reviews	4-15
	419.447:	Discharge	4-16
	419.448:	Recordkeeping and Reporting Requirements	4-16
	419.449:	Physical Site	4-18
	419.450:	Right of Entry	4-18

DAY HABILITATION PROGRAM MANUAL

SUBCHAPTER NUMBER AND TITLE **4 PROGRAM REGULATIONS**

(130 CMR 419.000)

DATE

DHP-19

TRANSMITTAL LETTER

01/08/99

PAGE

4-1

419.401: Introduction

130 CMR 419.000 establishes the requirements for the provision of services by day-habilitation programs under MassHealth. An applicant for certification as a MassHealth provider of day-habilitation services must meet the requirements specified in 130 CMR 419.000, 130 CMR 450.000, Administrative and Billing Regulations, and all other applicable state and federal laws and regulations.

419.402: Definitions

The following terms used in 130 CMR 419.000 have the meanings given in this section unless the context clearly requires a different meaning.

Active Treatment — a program of services that is based on an individual service plan, sets forth measurable goals and objectives, and prescribes an integrated program of activities and therapies necessary to reach the stated goals and objectives.

Case Manager — a professional from the day-habilitation program who has primary responsibility for a member's case and for the implementation of that member's individual service plan.

<u>Developmental Disability</u> — a severe, chronic disability that:

- (1) is attributable to a mental or physical impairment or combination of mental and physical impairments;
- (2) is manifested before that person reaches the age of 22;
- (3) is likely to continue indefinitely;
- (4) results in substantial functional limitations in three or more of the following major areas:
 - (a) self-care;
 - (b) language;
 - (c) learning;
 - (d) mobility;
 - (e) self-direction;
 - (f) capacity for independent living; and
 - (g) economic self-sufficiency; and
- (5) results in the person's need for special care, treatment, or services that are individually planned and coordinated and that are of lifelong or extended duration.

<u>Developmental Skills Training</u> — a series of planned, coordinated, goal-oriented services that are designed to improve the functional abilities of a developmentally disabled person. Such services include, but are not limited to, training in self-care, self-preservation, receptive and expressive communication, self-direction, activities of daily living (ADL), hygiene, grooming, and first aid.

DAY HABILITATION PROGRAM MANUAL

SUBCHAPTER NUMBER AND TITLE4 PROGRAM REGULATIONS

4 PROGRAM REGULATIONS (130 CMR 419.000)

TRANSMITTAL LETTER
DHP-19

DATE 01/08/99

PAGE

4-2

<u>Division</u> — the Massachusetts Division of Medical Assistance (DMA).

<u>Full-Time Equivalent (FTE)</u> — a standardized measure of a program's personnel resources used by the Massachusetts Division of Health Care Finance and Policy. One FTE equals coverage by one staff member for all the hours that the program is normally in operation.

<u>Functioning Level</u> — the degree to which a person can perform daily living activities and manage his or her life independently. Functioning level is measured through professional clinical assessments based on a standardized scale, such as the Stanford-Binet Intelligence Test or the Wechsler Adult Intelligence Scale.

<u>Individual Service Plan</u> — a written plan of care for each member that sets forth measurable, behaviorally based goals and prescribes an integrated program of individually designed activities or therapies necessary to achieve these goals. The objective of the plan is to help the member reach his or her optimal level of physical, intellectual, social, and vocational capabilities.

<u>Member</u> — the individual receiving day-habilitation services through MassHealth.

<u>Normalization</u> — the use of nonviolent and noncoercive methods to establish and maintain culturally valued characteristics and behaviors.

<u>Preadmission Screening</u> — a screening performed by the Department of Mental Retardation in accordance with 42 CFR 483.100 to determine whether a mentally retarded or developmentally disabled individual is appropriate for specialized services. A preadmission screening includes determinations made both before and after admission to the nursing facility.

<u>Provider</u> — the agency with responsibility for the day-to-day operation of facilities and programs subject to 130 CMR 419.000.

<u>Recipient Severity Profile Form</u> — the Division's evaluative tool that describes and measures the member's level of functional limitations.

<u>Site</u> — a single physical location of a day-habilitation program reviewed and approved by the Division and any other appropriate authorities for the operation of day-habilitation services for a specified number of daily participants. If a provider operates a day-habilitation program in more than one location, each location is considered a site. Each site must meet the requirements of 130 CMR 419.000.

<u>Specialized Services</u> — services that meet the requirements for active treatment of mental retardation and developmental disability in accordance with 42 CFR 483.120.

DAY HABILITATION PROGRAM MANUAL

SUBCHAPTER NUMBER AND TITLE 4 PROGRAM REGULATIONS

(130 CMR 419.000)

DHP-22

PAGE 4-3

TRANSMITTAL LETTER

DATE 01/01/00

419.403: Eligible Members

- (A) (1) MassHealth Members. The Division covers day-habilitation services only when provided to eligible MassHealth members, subject to the restrictions and limitations described in the Division's regulations. 130 CMR 450.105 specifically states, for each MassHealth coverage type, which services are covered and which members are eligible to receive those services.
 (2) Recipients of the Emergency Aid to the Elderly, Disabled and Children Program. For information on covered services for recipients of Emergency Aid to the Elderly, Disabled and Children, see 130 CMR 450.106.
- (B) For information on verifying member eligibility and coverage type, see 130 CMR 450.107.

419.404: Provider Eligibility

In order to qualify for participation in MassHealth, a day-habilitation program must be located in Massachusetts and must:

- (A) offer a structured, goal-oriented, active treatment program of medically oriented, therapeutic, and habilitation services to raise members' levels of functioning and facilitate independent living and self-management in their communities;
- (B) serve members who have developmental disabilities and who need more active treatment than is typically available through outpatient visits (for example, hospital visits, visits to mental health centers, or visits to independent therapists) but who do not require hospitalization or institutionalization;
- (C) be in operation at least five days a week and provide services to members at least six hours per day, but fewer than 24 hours, on each of those days;
- (D) contract with the Massachusetts Department of Mental Retardation (DMR) in accordance with the Executive Office of Health and Human Services guidelines, to ensure coordination of services to DMR clients; and
- (E) be accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF) or the Accreditation Council for Developmental Disabilities (ACDD).

419.405: Administration

The day-habilitation program must be staffed and organized to assume full legal authority and responsibility for administration, program policy, and clinical issues.

- (A) Organization. The day-habilitation program must have an organizational chart showing:
 - (1) its governing body;
 - (2) the administrator of each program; and
 - (3) the lines of authority for the delegation of responsibility down to the patient-care level.

DAY HABILITATION PROGRAM MANUAL

SUBCHAPTER NUMBER AND TITLE

4 PROGRAM REGULATIONS (130 CMR 419.000)

4-4

PAGE

TRANSMITTAL LETTER

DHP-22

DATE 01/01/00

- (B) <u>Fiscal Management</u>. The day-habilitation program must have a business-management system that clearly specifies the use of funds within budgetary constraints and fiscal restrictions. In addition, the program's fiscal reporting must reflect, by month, all:
 - (1) sources of income; and
 - (2) program expenses.

419 406: Reporting Requirements

- (A) A day-habilitation program will be subject to a survey by the Division at least annually to ensure compliance with 130 CMR 419.000.
- (B) The Division's Recipient Severity Profile form for each member enrolled in the program on February 1 of that year must be filed with the Division by March 1 of each year. Unless there is a Recipient Severity Profile form for each eligible member, the day-habilitation program is not eligible for any payment from the Division.
- (C) The day-habilitation program must file the following reports with the Massachusetts Division of Health Care Finance and Policy (DHCFP) by March 1 of each year:
 - (1) a copy of the program's uniform financial report (UFR); and
 - (2) audited financial statements from the previous year.
- (D) A day-habilitation program must comply with all applicable reporting requirements of other state agencies such as the Massachusetts Department of Mental Retardation and DHCFP.
- (E) The day-habilitation program must submit copies of any and all accreditation correspondence with CARF or ACDD to the Division.

419.407: Payment for Services

- (A) DHCFP establishes rates of payment for day-habilitation programs in the community, including supplemental staffing, and for day habilitation services provided by day habilitation providers in nursing facilities.
- (B) The rates of payment for day habilitation services in the community are divided into three categories reflecting a high, moderate, or low level of member function. The Division pays for day-habilitation services in the community at the applicable rate as determined in accordance with 130 CMR 419.443. In addition, when appropriate, the Division pays for supplemental staffing that is properly billed in accordance with the Division's supplemental staffing instructions.
- (C) The Division pays for day habilitation services provided by day habilitation providers in a nursing facility subject to the conditions of 130 CMR 419.409 and the Division's applicable day habilitation bulletins.
- (D) Payment for services is subject to the conditions, exclusions, and limitations set forth in 130 CMR 419.000 and 130 CMR 450.000, the *Administrative and Billing Regulations*.

DAY HABILITATION PROGRAM MANUAL

SUBCHAPTER NUMBER AND TITLE

4 PROGRAM REGULATIONS (130 CMR 419.000) **PAGE** 4-5

TRANSMITTAL LETTER

DHP-22

DATE 01/01/00

419.408: Scope of Services

- (A) A day-habilitation program must have available a variety of services sufficient to meet the needs of MassHealth members. A program must demonstrate to the Division that a range of services appropriate to the needs of its participants is available on site or in the community.
- (B) A day-habilitation program must provide the following services:
 - (1) nursing services and health-care supervision; and
 - (2) developmental-skills training.
- (C) In addition, the day-habilitation program must have available or arrange for the following services when required in the individual service plan:
 - (1) speech/language therapy;
 - (2) occupational therapy;
 - (3) physical therapy; and
 - (4) behavior management.

419.409: Conditions of Payment

- (A) The Division will pay a day-habilitation program provided that all the following conditions are met.
 - (1) The services are medically necessary as determined by the Division.
 - (2) The services are prescribed in the individual service plan.
 - (3) The services have been authorized by the member's physician or primary-care clinician.
- (B) In addition to the conditions in 130 CMR 419.409(A), if a member resides in a nursing facility, specialized services must be recommended as a result of preadmission screening.
- (C) The Division pays for day habilitation services provided by an approved day habilitation provider in the nursing facility where the member resides if:
 - (1) the conditions of 130 CMR 419.409 (A) and (B) are met; and
 - (2) (a) the member is so medically fragile that transport to a day habilitation program outside the nursing facility presents a significant risk to the health or safety of the resident;
 - (b) the member has declined to receive day habilitation services at a community site; or
 - (c) as determined by the Division, these services are the only services that are available to meet the member's specialized services needs.

DAY HABILITATION PROGRAM MANUAL

SUBCHAPTER NUMBER AND TITLE

4 PROGRAM REGULATIONS (130 CMR 419.000) **PAGE** 4-6

TRANSMITTAL LETTER

DHP-22

DATE

01/01/00

419.410: Nonreimbursable Services

The Division will not pay for the following services:

- (A) vocational- and prevocational-training services, which include vocational-skills assessment, career counseling, job training, and job placement;
- (B) sheltered workshops and other work-related services, which provide participants with work skills and supervised employment for the production of saleable goods;
- (C) educational services, which involve traditional classroom instruction of academic subjects, tutoring, and academic counseling;
- (D) functional maintenance services, which are a planned combination of social, vocational, and recreational services designed for chronically disabled people who need continuing services to maintain skills necessary to allow them to live in the community, but who have generally received maximum benefit from inpatient or day programs;
- (E) day-habilitation services provided to members residing in state-school intermediate-care facilities for the mentally retarded (ICFs/MR); and
- (F) research and experimental services.

419.411: Nonreimbursable Circumstances

- (A) The Division will not pay a day-habilitation program for any canceled sessions or any sessions missed by a member, for whatever reason.
- (B) The Division will not pay a day-habilitation program for any portion of a day during which the member is absent from the site, unless the program documents that the member was receiving services from the program staff in a community setting.
- (C) The Division will not pay for services provided to a member who has been determined by his or her physician, by the professional interdisciplinary team (see 130 CMR 419.423), or by a qualified representative of the Division, the Massachusetts Department of Mental Retardation, or the Massachusetts Department of Public Health to be unable to benefit from day-habilitation services.

(130 CMR 419.412 through 419.420 Reserved)

DAY HABILITATION PROGRAM MANUAL

SUBCHAPTER NUMBER AND TITLE 4 PROGRAM REGULATIONS

(130 CMR 419.000)

TRANSMITTAL LETTER
DHP-19

DATE 01/08/99

PAGE

4-7

419.421: Referrals and Written Agreements

To ensure that members receive all the services required in their individual service plans, the day-habilitation program must make prompt and appropriate referrals for those services not provided by the day-habilitation program itself. The day-habilitation provider must document all referrals in the member's clinical record and coordinate such referrals with the Massachusetts Department of Mental Retardation in accordance with the requirements of the contract (see 130 CMR 419.404(D)).

419.422: Staffing: General

A day-habilitation program must have specific personnel policies, including procedures for monitoring current licensure or certification of professional staff, staff training, supervision, and evaluation.

- (A) A day-habilitation program with 28 or fewer participants must include on its staff a professional interdisciplinary team of no fewer than four health-care professionals as described in 130 CMR 419.423.
- (B) A day-habilitation program with more than 28 participants must have one additional full-time equivalent (FTE) health-care professional for every seven additional participants. The minimum professional FTE staff-to-member ratio is one-to-seven. The maximum professional FTE staff-to-member ratio is one-to-four. For every additional 28 participants, the additional staff members must form a team as described in 130 CMR 419.423.
- (C) A day-habilitation program may employ paraprofessionals to help meet the needs of its members. The maximum FTE paraprofessional-to-member ratio is one-to-four.
- (D) Staffing ratios will be based on the average daily census of members enrolled in the program during the rate year.

419.423: Staffing: Professional Interdisciplinary Team

- (A) The professional interdisciplinary team consists of a group of health-care professionals who are responsible for designing, implementing, and supervising the provision of reimbursable services to all members in accordance with their individual service plans. The professional interdisciplinary team is also responsible for completing and submitting to the Division the Recipient Severity Profile Form.
- (B) The team must include a nurse. Other team members may include a speech therapist, an occupational therapist, a physical therapist, a developmental specialist, a behavioral specialist, a psychologist, or a rehabilitation counselor. Definitions and minimum qualifications relating to these disciplines are in 130 CMR 419.427. The composition of the team must be appropriate to the needs of the participants.

DAY HABILITATION PROGRAM MANUAL

SUBCHAPTER NUMBER AND TITLE4 PROGRAM REGULATIONS

(130 CMR 419.000)

TRANSMITTAL LETTER
DHP-19

DATE 01/08/99

PAGE

4-8

419.424: Staffing: Administrator

The day-habilitation program must designate one person as the administrator. The same person, if qualified, may serve as both the administrator and the program director.

- (A) <u>Qualifications</u>. The administrator must have either a bachelor's degree in business management or a related field or at least two years of experience in health-care management. One year of that experience must have been in a supervisory capacity.
- (B) <u>Responsibilities</u>. The administrator is responsible for managing the day-to-day activities of the program, reporting to the Division and other involved agencies, monitoring compliance with all applicable laws and regulations governing the program, and implementing the program's policies and procedures.

419.425: Staffing: Program Director

A day-habilitation program must have a full-time program director who is a health-care professional. In programs with 28 or fewer participants, the program director may be included as one member of the professional interdisciplinary team. In programs with more than 28 participants, there must be a program director in addition to the team.

- (A) <u>Qualifications</u>. The program director must have a minimum of five years of professional health-care experience subsequent to attaining a bachelor's degree. This must include clinical experience and at least two years in a mental retardation program. At least one of those two years must have been spent in an administrative role.
- (B) <u>Responsibilities</u>. The responsibilities of the program director include hiring, firing, and training staff members; supervising staff activities; coordinating staff activities to meet the program objectives; and overseeing member services.

419.426: Staffing: Health-Care Supervisor

- (A) Qualifications. The health-care supervisor must be:
 - (1) a registered nurse with at least one year of experience in a community health setting; and
 - (2) employed at least half-time.
- (B) Responsibilities. The health-care supervisor must:
 - (1) provide direct care and training in relevant areas;
 - (2) coordinate medical services with each member's primary physician or medical clinic;
 - (3) oversee all health-care services provided to the members at the program;

DAY HABILITATION PROGRAM MANUAL

SUBCHAPTER NUMBER AND TITLE

4 PROGRAM REGULATIONS (130 CMR 419.000)

TRANSMITTAL LETTER DHP-19

PAGE 4-9

DATE 01/08/99

- (4) participate in the continuing interdisciplinary evaluation and review of each member's needs and status;
- (5) obtain reports and approval of treatment plans from primary physicians;
- (6) document in each member's record any recommendation resulting from the periodic reviews; and
- (7) advise the program director and the day habilitation staff of any medical problems that may hinder a member's progress or that may be aggravated by activities at the program.

419.427: Staffing: Minimum Professional Qualifications

Each professional staff member employed directly by the program or working as a consultant must meet the minimum qualifications for his or her discipline as listed below.

- (A) Behavioral Specialist. Behavioral specialists must have a master's degree in psychology from an accredited program, and must have one year of experience in a training program for either the mentally retarded or the developmentally disabled.
- (B) Developmental Specialist. Each developmental specialist must have a bachelor's degree in a human services-related field and must have at least one year of experience in a training program for the mentally retarded or the developmentally disabled. As an alternative to a degree, a developmental specialist must have at least two years of experience in a training program for either the mentally retarded or the developmentally disabled.

(C) Occupational Therapist.

- (1) The primary occupational therapist must be a registered member of the American Occupational Therapy Association (AOTA), must be currently licensed by the Massachusetts Board of Registration in Allied Health Professions, and must have one year of experience in a training program for either the mentally retarded or the developmentally disabled.
- (2) Any additional occupational-therapy personnel must be registered members of AOTA or certified occupational-therapist assistants (COTAs) registered with AOTA. A COTA must work under the direct supervision of the primary occupational therapist.

(D) Physical Therapist.

- (1) The primary physical therapist must be currently licensed by the Massachusetts Board of Registration in Allied Health Professions and must have one year of experience in a training program for either the mentally retarded or the developmentally disabled.
- (2) Any additional physical therapy personnel must be currently licensed by the Massachusetts Board of Registration in Allied Health Professions or must be graduates of an approved physical-therapy-assistant program. A physical-therapy assistant must work under the direct supervision of the primary physical therapist.

DAY HABILITATION PROGRAM MANUAL

SUBCHAPTER NUMBER AND TITLE 4 PROGRAM REGULATIONS

PROGRAM REGULATION (130 CMR 419.000)

TRANSMITTAL LETTER
DHP-19

DATE

PAGE

4-10

01/08/99

(E) <u>Psychologist</u>. The psychologist must be currently licensed by the Massachusetts Board of Registration of Psychologists, or must have at least a master's degree in clinical psychology and at least three years of full-time, supervised, postgraduate experience. If psychological testing is included in the day-habilitation program, the testing must be performed by a licensed psychologist.

(F) Registered and Licensed Practical Nurses.

- (1) The primary nurse must be currently registered with the Massachusetts Board of Registration in Nursing and must have one year of experience in a training program for either the mentally retarded or the developmentally disabled.
- (2) Any additional nurses on the staff must be either registered nurses (RNs) or licensed practical nurses (LPNs) with at least one year of experience in a training program for either the mentally retarded or the developmentally disabled. LPNs must have direct supervision by a registered nurse for a minimum of six hours per week for 28 participants, with an additional two hours per week for every additional 14 participants.
- (G) <u>Rehabilitation Counselor</u>. Rehabilitation counselors must be certified by the National Commission on Rehabilitation Counselor Certification and must have at least one year of experience in a training program for either the mentally retarded or the developmentally disabled.

(H) Speech/Language Therapist.

- (1) The primary speech/language therapist must be currently licensed by the Massachusetts Board of Registration in Allied Health Professions and must have either a Certificate of Clinical Competence (CCC) from the American Speech, Language, and Hearing Association (ASLHA) or a statement from ASLHA of certification equivalency.
- (2) Any additional speech/language-therapy personnel must work under the direct supervision of the primary speech/language therapist as a speech-therapy assistant (STA). STAs must be enrolled in a professional training program or must have obtained at least a bachelor's degree in speech pathology and audiology.
- (I) <u>Paraprofessional Staff</u>. Paraprofessional staff members must have a minimum of at least one year of work experience in a mental-health or mental-retardation setting. Paraprofessionals must not serve on the professional interdisciplinary team.

(130 CMR 419.428 through 419.430 Reserved)

DAY HABILITATION PROGRAM MANUAL

SUBCHAPTER NUMBER AND TITLE 4 PROGRAM REGULATIONS

4 PROGRAM REGULATION (130 CMR 419.000)

TRANSMITTAL LETTER
DHP-19

DATE 01/08/99

PAGE

4-11

419.431: Emergency Services and Plans

The provider must establish plans and procedures for medical and other emergencies. These plans and procedures must include, at a minimum, the following:

- (A) a written letter of agreement with a nearby hospital or emergency facility, stating that the member will be cared for in the event of a medical or other emergency;
- (B) a written letter of agreement with an ambulance company for emergency transportation (emergency 911 may be substituted);
- (C) an easily accessible file on each member listing his or her name, the telephone number of his or her physician, special medical needs including treatments and medications, and emergency phone numbers for notification of the family or legal guardian;
- (D) a first-aid kit in the member training area;
- (E) a conspicuously posted notice indicating emergency evacuation procedures, and a written evacuation plan for meeting the special needs of members, under circumstances requiring emergency evacuation;
- (F) a written plan for notifying the fire department and police in emergencies;
- (G) written policy to ensure instruction of staff and members in emergency procedures and evacuation;
- (H) monthly fire drills and a record of each such drill; and
- (I) a requirement that, at all times there is on duty at least one staff member who is certified in first aid and cardio-pulmonary resuscitation (CPR). The provider must maintain a current record of training and recertification of staff and post in a conspicuous location the names of certified individuals.

419.432: Administration of Medications

- (A) The day-habilitation program must maintain security for all medications and drugs in accordance with all applicable federal and state laws.
- (B) All prescribed medications must be properly labeled and maintained in a locked storage location in the member training area except when being dispensed.

DAY HABILITATION PROGRAM MANUAL

SUBCHAPTER NUMBER AND TITLE 4 PROGRAM REGULATIONS

4 PROGRAM REGULATIONS (130 CMR 419.000)

TRANSMITTAL LETTER
DHP-19

PAGE 4-12

DATE

01/08/99

- (C) Nonprescription medications must be clearly labeled and kept on shelves separate from the prescription medications in the locked storage location.
- (D) A locked storage compartment for medications must be available in a refrigerator in the member training area.
- (E) All discontinued and outdated drugs and containers with worn and illegible or missing labels must be discarded.
- (F) Prescriptions must:
 - (1) be for one member only with his or her name clearly indicated; and
 - (2) contain information on administering the medication.

419.433: Food Storage and Preparation

- (A) The day-habilitation program must store all food in the proper conditions of temperature, light, sanitation, and security.
- (B) The day-habilitation program must store all non-food substances in accurately labeled containers separately from food. The day-habilitation program must clearly label all potentially dangerous substances as such.
- (C) The program must have written procedures for food preparation and storage consistent with all applicable health and sanitation codes. These procedures must include the designation of a staff person to supervise food preparation by members.

419.434: Written Policies and Procedures

A day-habilitation program must establish and implement written policies and procedures that are consistent with 130 CMR 419.000 and include the following:

- (A) a statement of program objectives;
- (B) criteria for admission, including procedures for interdisciplinary review of each referral and the coordination of the individual service plan with the primary-care physician and others involved in the habilitation of the member;
- (C) treatment procedures and methods, including case assignment, case review, drug and medication dispensing, discharge planning, and follow-up;

DAY HABILITATION PROGRAM MANUAL

SUBCHAPTER NUMBER AND TITLE **4 PROGRAM REGULATIONS**

(130 CMR 419.000)

TRANSMITTAL LETTER

PAGE

4-13

DATE DHP-19 01/08/99

- (D) a policy based on recommendations from primary-care physicians that defines, in accordance with applicable state and federal laws, the uses of physical restraints, the staff members who must authorize their use, and a mechanism for monitoring and controlling their use;
- (E) a policy to provide for registration and disposition of employees' and members' grievances without threat of reprisal or discharge; and
- (F) criteria for discharge, including procedures for discharge, referral to other programs, and follow-up.

419.435: Admission Criteria

In order to be considered for admission into a day-habilitation program, a member must meet the following requirements.

- (A) The member must have a developmental disability as defined in 130 CMR 419.402.
- (B) The member must need, and be expected to benefit from, active treatment designed to improve his or her level of independent functioning.
- (C) The member must have a personal physician or medical clinic that may be contacted for consultations, examinations, and emergencies.
- (D) Within 12 months before admission, the member must have had a comprehensive evaluation by a referring provider that includes the following:
 - (1) written assessment of his or her social skills;
 - (2) a written assessment of his or her medical, mental, functional, and developmental status; and
 - (3) a home assessment that includes a family history, the individual's developmental history, and a description of the member's adaptation to the home environment.
- (E) The member must have a record of all past and present immunizations and diagnostic tests.
- (F) Members residing in nursing facilities must have been recommended for specialized services as a result of a preadmission screening. The day-habilitation program must keep a copy of the recommendation in the member's record.

DAY HABILITATION PROGRAM MANUAL

SUBCHAPTER NUMBER AND TITLE 4 PROGRAM REGULATIONS

4 PROGRAM REGULATION (130 CMR 419.000)

TRANSMITTAL LETTER
DHP-19

DATE

DATE 01/08/99

PAGE

4-14

419.436: Admission Procedures

In order to admit a member to a day-habilitation program, the program must follow the procedures outlined below.

- (A) The professional interdisciplinary team must review the comprehensive evaluation (see 130 CMR 419.435(D)) in order to determine whether the member is likely to benefit from the treatment that is provided by the day-habilitation program.
- (B) A member must have had a physical examination by a licensed physician within 12 months prior to his or her admission to the day-habilitation program. The professional interdisciplinary team must review the comprehensive evaluation to determine any medical contraindications or limitations to the member's participation in the program.
- (C) The program must have obtained the written approval of the member, a physician or medical clinic, and, if applicable, the member's parents or legal guardian.
- (D) The program must file a Recipient Severity Profile Form with the Division.

(130 CMR 419.437 through 419.442 Reserved)

DAY HABILITATION PROGRAM MANUAL

SUBCHAPTER NUMBER AND TITLE4 PROGRAM REGULATIONS

4 PROGRAM REGULATIONS (130 CMR 419.000)

TRANSMITTAL LETTER
DHP-19

DATE 01/08/99

PAGE

4-15

419.443: Recipient Severity Profile

The day-habilitation program must complete and submit a current Recipient Severity Profile form for each member upon admission and annually thereafter. The Division will review the Recipient Severity Profile form to identify each member's level of function as high, moderate, or low, and notify the program accordingly.

419.444: Individual Service Plan

- (A) Within five working days after the member's admission, the professional interdisciplinary team must design an interim care plan. The plan must outline a temporary schedule of treatment and activities that will be used until the individual service plan is completed.
- (B) Within 90 days after the member's admission, an individual service plan must be completed by the interdisciplinary team in cooperation with the Massachusetts Department of Mental Retardation when appropriate. The plan must specify realistic goals within time limits. The goals must cover the member's habilitative, medical, social, occupational, and psychological needs. If medication is indicated, the plan must specify how often a physician will review the member's condition. If the member already has an individual service plan developed in another program, that plan may be used if it is updated and modified to include day-habilitation services.

419.445: Case Manager

Each member must be assigned a case manager. The case manager is a member of the day-habilitation program staff who is qualified to assume primary responsibility for that member. The case manager supervises the implementation of the individual service plan and maintains the member's record.

419.446: Reviews

- (A) The case manager must review the member's treatment and habilitation goals monthly and inform the staff, using staff meetings, of any significant changes in the member's status.
- (B) The professional interdisciplinary team must conduct, at least quarterly, a review of the member's overall progress. A copy of this report must be included in the member's record. If indicated by the review, the individual service plan must be reformulated as set forth in 130 CMR 419.444.

DAY HABILITATION PROGRAM MANUAL

SUBCHAPTER NUMBER AND TITLE 4 PROGRAM REGULATIONS

(130 CMR 419.000)

TRANSMITTAL LETTER
DHP-19

DATE 01/08/99

PAGE

4-16

419.447: Discharge

A member must be discharged from a day-habilitation program when a periodic review shows that the member has met the therapeutic goals defined in his or her individual service plan or has ceased to benefit from the program.

(A) <u>Discharge Procedures</u>. The day-habilitation program staff must coordinate the discharge with the member's family or legal guardian with the Massachusetts Department of Mental Retardation, if applicable, and with the staff of the program or agency to which the member is transferred, if applicable.

(B) Discharge Plan.

- (1) A discharge plan, dated and signed by the program director, must be kept in the member's record for at least four years after the date of discharge and must remain accessible to representatives from the Division, the Massachusetts Department of Mental Retardation, the Massachusetts Department of Public Health, and other state and federal agencies that are authorized by law to have such information.
- (2) The Division will not pay a day-habilitation program for services provided on or after the effective date of a discharge plan.

419.448: Recordkeeping and Reporting Requirements

(A) Member Records.

- (1) Day-habilitation programs must maintain clinical records for each member for at least four years after the date of service. Such records must meet federal and state record-keeping requirements as set forth in the Division's administrative and billing regulations at 130 CMR 450.000.
- (2) Programs are holders of personal data pursuant to M.G.L. c. 66A and must ensure the accessibility of member records in accordance with such law and all other applicable federal and state laws and regulations. Without limiting the generality of the foregoing, member information may be released only to the following:
 - (a) people authorized in writing by the member or the member's legal guardian to receive such information;
 - (b) people directly responsible for delivering of health-care services to the member; and
 - (c) government agencies authorized by law to have access to such information.
- (3) Each member's record must include all documentation pertaining to the individual service plan. The record must also contain information necessary to identify the member and to design an appropriate plan of care. This information must include the following:
 - (a) the member's name, member identification number, address, telephone number, sex, age, marital status, next of kin, school or employment status, and the date of initial contact with the program;
 - (b) a member profile that includes a brief history, a list of major disabilities, the reason for referral to day habilitation, the prognosis, the projected length of stay in day habilitation, the projected placement following discharge from day habilitation, and the name of the case manager assigned to the member;

DAY HABILITATION PROGRAM MANUAL

SUBCHAPTER NUMBER AND TITLE 4 PROGRAM REGULATIONS

PROGRAM REGULATIONS (130 CMR 419.000)

TRANSMITTAL LETTER
DHP-19

DATE 01/08/99

PAGE

4-17

(c) an educational, social, medical, and vocational history with assessment reports from qualified providers and an updated record of past and present immunizations and tuberculin tests;

- (d) a report of the comprehensive preadmission evaluation signed by the referring provider;
- (e) a report of the member's most recent annual physical examination and the physician's recommended plan of care based on his or her review of this report;
- (f) the name, address, and telephone number of the physician or medical clinic serving the member;
- (g) the written approval of the individual service plan from the professional interdisciplinary team, the physician, the member or the member's legal guardian;
- (h) documentation supporting the scores reported on the Division's Recipient Severity Profile form;
- (i) documentation by the case manager of all conferences with the member's family and friends, and with outside professionals;
- (j) a report of any home visits;
- (k) daily attendance records;
- (1) progress notes updated monthly by the case manager, the health-care supervisor, and, when appropriate and available, by other people significantly involved in implementing the individual service plan;
- (m) reports of all quarterly reviews conducted in accordance with 130 CMR 419.446;
- (n) written authorization from the member or the member's legal guardian for the release of information in accordance with 130 CMR 419.448(A)(2); and
- (o) the discharge notice, if the member is discharged.
- (B) Staff Records. The provider must maintain a file of up-to-date staff resumes.

(C) General Records.

- (1) The provider must keep all records pertaining to billing, finances, program, personnel, and individual participants for at least four years after the date of service.
- (2) The provider must maintain records of the number of participants being served, the number of individuals on the waiting list, and the number of staff and their qualifications.
- (3) The provider must maintain all records specified in these regulations, or as otherwise may be required by the Division.
- (4) Job descriptions must be available for all personnel.

(D) Reporting Requirements.

- (1) The provider must make all records available to the Division as requested.
- (2) The day habilitation director or designee is responsible for notifying the Division immediately by phone and in writing of the following situations:
 - (a) fire, accident, injury, or evidence of serious communicable disease contracted by program staff or MassHealth members;
 - (b) death of a member at, en route to, or en route from the program; and
 - (c) changes in professional personnel.

DAY HABILITATION PROGRAM MANUAL

SUBCHAPTER NUMBER AND TITLE 4 PROGRAM REGULATIONS

(130 CMR 419.000)

TRANSMITTAL LETTER
DHP-19

DATE

PAGE

4-18

01/08/99

- (3) The provider must notify the Division at least 60 days before terminating the program but must continue to provide services until all members have been transferred to other day-habilitation programs. The provider must develop a discharge plan for each member before termination in accordance with 130 CMR 419.447(B).
- (4) The provider must notify the Division before increasing the number of members in the program.
- (5) Any increase in member census must be approved by the Division.

419.449: Physical Site

A day-habilitation program must be located in a facility that meets the following standards.

- (A) The site must be designed to comply with the applicable regulations of the Massachusetts Architectural Barriers Board (ABB).
- (B) The site must meet the requirements of all state and local building, sanitary, health, fire, and zoning codes, and all other requirements pertaining to health, safety, and sanitation. All certificates of compliance must be displayed in a conspicuous location. The provider must forward to the Division, within seven days, any waiver, variance, or other changes received by the licensee to any aforementioned code.
- (C) The Division must approve each day habilitation site. In the event of a site change, renovation, or new construction, the provider must forward a copy of all plans to the Division for approval. Upon completion of renovations, moves, or new construction, and upon compliance with the requirements in 130 CMR 419.449(B), the Division must view the site to determine compliance with the requirements.
- (D) The site must have easily accessible ABC fire extinguishers in each program area.
- (E) The kitchen and bathrooms must be designed and equipped for teaching activities of daily living skills to all participants.

419.450: Right of Entry

Any duly designated officer or employee of the Division has the right to enter and inspect at any time without prior notice the entire premises of any facility for which an application has been received or for which an agreement exists. Any application constitutes permission for such entry and inspection.

REGULATORY AUTHORITY

130 CMR 419.000: M.G.L. c. 118E, ss. 7 and 12